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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

CARRANZA, ISMAEL TOVAR

Plaintiff,

vs.

JAMES A. YATES, WARDEN

Defendant.

CASE NO. _____

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

MHP

(PR)

I, ISMAEL TOVAR CARRANZA, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 City of Dallas Texas

5 Year 2002

6 Wages per month \$ 2,400.00

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ___ No X

10 self employment

11 b. Income from stocks, bonds, Yes ___ No X

12 or royalties?

13 c. Rent payments? Yes ___ No X

14 d. Pensions, annuities, or Yes ___ No X

15 life insurance payments?

16 e. Federal or State welfare payments, Yes ___ No X

17 Social Security or other govern-

18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 _____
 22 _____

23 3. Are you married? Yes ___ No X

24 Spouse's Full Name: _____

25 Spouse's Place of Employment: _____

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ _____ Net \$ _____

28 4. a. List amount you contribute to your spouse's support: \$ _____

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).

5 NONE
 6 _____

7 5. Do you own or are you buying a home? Yes ___ No X

8 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

9 6. Do you own an automobile? Yes ___ No X

10 Make _____ Year _____ Model _____

11 Is it financed? Yes ___ No X If so, Total due: \$ _____

12 Monthly Payment: \$ _____

13 7. Do you have a bank account? Yes ___ No X (Do not include account numbers.)

14 Name(s) and address(es) of bank: _____

15 _____

16 Present balance(s): \$ _____

17 Do you own any cash? Yes ✓ No ___ Amount: \$ ~~400.00~~ 391.83

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes ___ No X

20 _____

21 8. What are your monthly expenses?

22 Rent: \$ 0 Utilities: 0

23 Food: \$ 15.00 Clothing: 0

24 Charge Accounts:

25 <u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26 _____	\$ <u>0</u>	\$ <u>0</u>
27 _____	\$ <u>0</u>	\$ <u>0</u>
28 _____	\$ <u>0</u>	\$ <u>0</u>

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

NONE

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

2-15-08

DATE

Israel Carmon 39-T

SIGNATURE OF APPLICANT

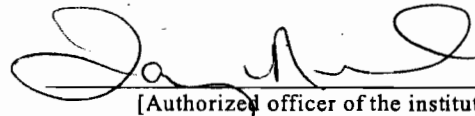
Case Number: ~~5-040321-2~~

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Ismael Carranza for the last six months
Pleasant Valley State Prison ^[prisoner name] where (s)he is confined.
_[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 43.43 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 391.83.

Dated: 2/21/08


[Authorized officer of the institution]

REPORT ID: TS3030 .701 REPORT DATE: 02/21/08 PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS
PLEASANT VALLEY STATE PRISON
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: AUG. 21, 2007 THRU FEB. 21, 2008

ACCOUNT NUMBER : V52236 BED/CELL NUMBER: DFB2T20000002200
ACCOUNT NAME : CARRANZA, ISMAEL TOVAR ACCOUNT TYPE: I
PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

DATE	TRAN	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
08/21/2007		BEGINNING BALANCE					320.71
09/12	FC04	DRAW-FAC 4	1120 FAC D			180.00	140.71
09/18	VOR1	REST OVERPMT	1200RESTIT		146.00		286.71
09/18	VOF1	ADMIN FEE-RES	1200RESTIT		14.60		301.31
10/02	FR01	CANTEEN RETUR	701359			165.95-	467.26
10/10	FC04	DRAW-FAC 4	1488 FAC D			15.00	452.26
11/08	FC04	DRAW-FAC 4	1936 FAC D			21.00	431.26
11/16	W516	LEGAL COPY CH	702075			0.70	430.56
12/12	FC04	DRAW-FAC 4	2432 FAC D			15.00	415.56
12/20	D300	CASH DEPOSIT	2558 MR		100.00		515.56
		ACTIVITY FOR 2008					
01/09	FC04	DRAW-FAC 4	2819 FAC D			20.00	495.56
02/06	W401	DONATION-ALCO	3275SOBGR			72.50	423.06
02/13	FC04	DRAW-FAC 4	3383 FACD			18.00	405.06
02/19	W536	COPAY CHARGE	3459 COPAY			5.00	400.06

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: / / CASE NUMBER: 050403212
COUNTY CODE: FINE AMOUNT: \$ 0.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
08/21/2007		BEGINNING BALANCE		146.00-
09/18/07	VOR1	REST OVERPMT ONLY	146.00	0.00

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED.



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST:
CALIFORNIA DEPARTMENT OF CORRECTIONS

BY TRUST OFFICE

2/21/08

REPORT ID: TS3030 .701 REPORT DATE: 02/21/08 PAGE NO: 2

CALIFORNIA DEPARTMENT OF CORRECTIONS
PLEASANT VALLEY STATE PRISON
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: AUG. 21, 2007 THRU FEB. 21, 2008

ACCT: V52236 ACCT NAME: CARRANZA, ISMAEL TOVAR ACCT TYPE: I

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
320.71	260.60	181.25	400.06	0.00	0.00

CURRENT
AVAILABLE
BALANCE
400.06

THIS STATEMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.



CALIFORNIA DEPARTMENT OF CORRECTIONS

BY TRUST OFFICE

2/21/08

PROOF OF SERVICE BY MAIL

I, ISMAEL TOVAR CARRANZA, declare;

I am at least 18 years of age, and a party / and not a party to the attached herein cause of action. My mailing address is;

PLEASANT VALLEY STATE PRISON
FACILITY D, BUILDING 2, CELL 220-4
POST OFFICE BOX 8504
COALINGA CALIFORNIA
93210-8504

On March 15, 2008, I delivered to prison officials at Pleasant Valley State Prison at the above address the following documents for mailing via the U.S. Postal Service:

1. WRIT OF HABEAS CORPUS

2. IN FORMA PAUPERIS

3. _____

4. _____

In a sealed envelope(s) with postage fully prepaid, addressed to:

1. OFFICE OF THE CLERK, U.S. DISTRICT COURT, NORTHERN DISTRICT
OF CALIFORNIA, 450 GOLDEN GATE AVENUE, SAN FRANCISCO,

2. CALIFORNIA 94102

3. _____

4. _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, 20____, at Coalinga, California.

Petitioner / Declarant IN PRO PER